

## Safe Injection Practices (≥ PL2)

### Clinical Indications:

1. To ensure adherence to basic principles of infection control and aseptic technique to prevent or diminish the risk of disease transmission during the initiation of IV access, IM/SQ injections, drawing of medications, and preparation and delivery of parenteral medications.

### Contraindications:

1. None

### Notes/Precautions:

1. The primary breaches in infection control practice that contribute to potential disease transmission include, but not limited to: Reinsertion of used needles into multiple dose vial or solution container and use of a single needle/syringe to administer IV medication to multiple patients.
2. Adherence to basic principles of aseptic technique includes the use of sterile, single use, disposable needle and syringe for each injection given and prevention of contamination of injection equipment and medication.
3. Whenever possible, use of a single dose vial is preferred over multi dose vials, especially when medications will be administered to multiple patients.

### Procedure:

1. Initiate the use of chlorhexidine skin preparation prior to the application of a sharp appliance including, but not limited to venous catheters, intraosseous infusion needles, lancets, and the delivery of medications or immunizations through syringes either intramuscular, dermal, or subcutaneous.
2. Use aseptic technique to avoid contamination of sterile injection equipment.
3. Do Medication Administration Cross Check prior to injection
4. Needles, cannulae and syringes are sterile, single-use items; they should not be reused for another patient nor to access a medication or solution that might be used for a subsequent patient.
5. Consider a syringe or needle/cannula contaminated once it has been used to enter or connect to a patient's intravenous infusion bag or administration set.
6. Use single-dose vials for parenteral medications whenever possible.
7. Do not administer medications from single-dose vials or ampules to multiple patients or combine leftover contents for later use.
8. If multidose vials must be used, both the needle or cannula and syringe used to access the multidose vial must be sterile.
9. Multidose vials should be stored in accordance with the manufacturer's recommendations; discard if sterility is compromised or questionable.
10. All sharps should be properly disposed into a puncture resistant container as soon as possible.